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☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

To Whom It May Concern:

Please see the attached request by applicant for the change of correspondence address. Please update the change.

Best regards,

Shian Luong
PCT Special Programs Office
USPTO
Shian.luong@uspto.gov

HOWREY

2941 FAIRVIEW PARK DRIVE
SUITE 200

FALLS CHURCH, VA 22042

PHONE: 703.663.3600 • DIRECT FAX: 703.852.7204

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Gentlemen:

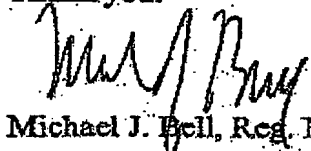
On January 5, 2007 we filed Change of Correspondence Address forms to move several applications to Customer Number 56744 from Customer Number 32894. This has still not been completed properly.

I have attached copies of the Change of Correspondence Address Application forms and the stamped postcard receipt.

Please forward to DOBO and have the updates completed as soon as possible. The change of address forms are already associated with each application.

If you have any questions, please contact Deborah White at 703-663-3751.

Thank you.



Michael J. Bell, Reg. No. 39604

DM_US-20346334_2

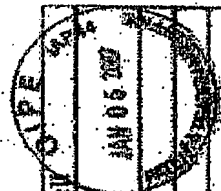
Please indicate receipt of the below-identified paper:

<input type="checkbox"/> New Application For: Type of Patent	Priority Date:
<input type="checkbox"/> Pgn priority claimed	Fee Amt: \$ 0 any fee not specified: Amt No: 08 3038
<input type="checkbox"/> Continuation	<input type="checkbox"/> CIP <input type="checkbox"/> Divisional <input type="checkbox"/> CPA <input type="checkbox"/> RCE
<input type="checkbox"/> Specification: Pages	<input type="checkbox"/> Drawings: Sheets
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<input checked="" type="checkbox"/> Other: Mail Stop: EBC: Request for Change of Correspondence Address Transmittal: 1 page: PTO/SB/122-12 forms: PTO/SB/123-43 Forms: 1 return postpaid	
<input type="checkbox"/> Assignment Enclosed	<input type="checkbox"/> Cert. of Express Mailing <input type="checkbox"/> Exp. Mail:

PTO

IDENTIFICATION OF APPLICATION

Serial No.:	Filing Date:	Responsible Any: Bell
Title:		
Applicant:	Entered By: Sargeev	
Client:	Firm File No. 00137.0001.000000	
To PTO VIA Hand Delivery on	Date: 1/5/2007	Due Date: 1/5/2007



PTO/SB/122 (01-06)
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**CHANGE OF
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Application

Address to:
Commissioner for Patents
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Application Number	10/528,593
Filing Date	03-21-2005
First Named Inventor	Carl Holdampf
Art Unit	3812
Examiner Name	MORROW, JASON S
Attorney Docket Number	00137.0089.PCUS01

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with
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I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 39604
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed
Name

Michael Bell

Date

Telephone 703-863-3800

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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